



## Application for Electrical Permit

### Office of the Building Official

Town Of Stonington

152 Elm Street

Stonington, Connecticut 06378

(860) 535-5075 • Fax (860) 535 - 1023

Electrical Permit # \_\_\_\_\_

Date: \_\_\_\_\_ Estimated Cost: \_\_\_\_\_ Fee: \_\_\_\_\_

Location of Property: \_\_\_\_\_

Owner: \_\_\_\_\_ Address: \_\_\_\_\_

(if different from location)

Residential Service: New \_\_\_\_\_ Replacement \_\_\_\_\_ Addition \_\_\_\_\_ Capacity in Amps \_\_\_\_\_

Size of Service Conductors \_\_\_\_\_ Number of Panels \_\_\_\_\_ Size in Panels \_\_\_\_\_

Lighting Circuits \_\_\_\_\_ Appliance Circuits \_\_\_\_\_ Special Use Circuits \_\_\_\_\_

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Commercial Service: New \_\_\_\_\_ Replacement \_\_\_\_\_ Addition \_\_\_\_\_ Amps \_\_\_\_\_

Voltage \_\_\_\_\_ Phase \_\_\_\_\_ Conductor Size \_\_\_\_\_

Loads \_\_\_\_\_ Lighting \_\_\_\_\_ Heat \_\_\_\_\_ Motor \_\_\_\_\_

Total Motor H.P. \_\_\_\_\_ Largest Motor H.P. \_\_\_\_\_

Remarks: \_\_\_\_\_

I hereby certify that the proposed electrical installation will conform to the applicable building and electrical codes of the State of Connecticut.

Signed: \_\_\_\_\_ Company: \_\_\_\_\_  
Master Electrician

License # \_\_\_\_\_ Approved: \_\_\_\_\_  
Building Official

Telephone # of Electrician: \_\_\_\_\_

CRS # from CL&P: \_\_\_\_\_